



# VVFC Vaccine Order Form

Date \_\_\_\_\_ Pin \_\_\_\_\_

Contact \_\_\_\_\_

Practice \_\_\_\_\_

Address \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

Shipping Instructions \_\_\_\_\_

*Please circle any new information in order for us to update your records.*

Orders are accepted Monday - Thursday 8:30 a.m. to 4:00 p.m. by phone, fax, or mail.  
All orders must be received by 4:00p.m. on Thursday to be delivered the following week.  
Orders received after 4:00p.m. Thursday will be shipped and delivered in two weeks.

*Please note: Manufacturer selections are based on federal contracts and vaccine availability.  
While every effort will be made to honor your preferences, substitutions may need to be made.*

**VVFC vaccine orders should be submitted quarterly, unless otherwise authorized.**

Medicaid Y-Code/ CPT Code	Vaccine		Unit Shipping Size	Total Doses	Medicaid Y-Code/ CPT Code	Vaccine		Unit Shipping Size	Total Doses
Y0014 90700	DTaP	DAPTACEL (Aventis)	5 x 1 dose vial		Y0020 90744	Hepatitis B Pediatric/Adolescent 3 Dose Series	Engerix B (GlaxoSmithKline)	10 x 1 dose vial	
		Tripedia (Aventis)	10 x 1 dose vial				Recombivax (Merck)	10 x 1 dose vial	
		Infanrix (GlaxoSmithKline)	10 x 1 dose vial		Y0033 90748	Hep B-Hib	Comvax (Merck)	10 x 1 dose vial	
90723	DTaP/Hep B/IPV	Pediarix (GlaxoSmithKline)	10 x 1 dose vial		Y0018 90648	Hib	ActHib (Aventis)	5 x 1 dose vial	
Y0034 90721	DTaP/Hib *4th dose only	TriHibit (Aventis)	5 x 1 dose vial		Y0018 90647		PedvaxHib (Merck)	10 x 1 dose vial	
Y0022 90713	e-IPV	Ipol (Aventis)	10 dose vial		Y0023 90707	MMR	MMR II (Merck)	10 x 1 dose vial	
Y0035 90633	Hepatitis A *high risk pediatric use only	Havrix (GlaxoSmithKline)	1 dose vial		Y0036 90669	Pneumococcal Conjugate	Prevnar (Wyeth/Lederle)	5 x 1 dose vial	
		Vaqta (Merck)	10 x 1 dose vial		Y0015 90718	Td Adolescent	(Aventis)	10 dose vial	
Y0037 90743	Hepatitis B-2 Adolescent 11-15 years 2 Dose Series	Recombivax 2 Dose Series (Merck)	10 x 1 dose vial		Y0028 90716	Varicella Shipped Separately	Varivax (Merck)	10 x 1 dose vial	
Special order vaccines available with approval: Pediatric DT and Pneumococcal Polysaccharide.									

**Virginia Vaccines For Children Program**  
Division of Immunization, P.O. Box 2448  
1500 East Main Street, Room 120  
Richmond, Virginia 23219  
Phone (877) 781-VVFC (8832) or (804) 786-6246  
Fax (804) 786-5738

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DEPARTMENT  
OF HEALTH  
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[www.vdh.state.va.us](http://www.vdh.state.va.us)

Revised 06/01/2003